

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street, Room 1130
Sacramento, CA 95814
Telephone: (916) 323-5079

WEBSITE ADDRESS:
<http://caag.state.ca.us/charities/>

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

2000 ANNUAL FINANCIAL REPORT

(California Government Code Section 12599)

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or filing penalties as defined in Government Code Section 12586.1 (Recently enacted).

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:

CF Number 486

Harris O'Malley Marketing, Inc.

Name of Commercial Fundraiser

23241 Ventura Blvd., Suite 101

Address of Commercial Fundraiser

Woodland Hills CA 91364

City, State, and ZIP Code of Commercial Fundraiser

Telephone Solicitation for Charitable Donations held (on) (from) 1/1/2002, to 4/15/2002, to 200 (Date or dates must be shown)

Name and Address of Charitable Organization or Charitable Purposes:

CT No. 57613 F.E.I.N. No. 52-1218336

People for the Ethical Treatment of Animals

Name of Charity

501 Front Street

Address of Charity

Norfolk VA 23510

City, State, and ZIP Code of Charity

1. REVENUE
- A. Cash contributions
 - B. Entertainment sales or admission charges
 - C. Sales from products
 - D. Advertisement sales
 - E. Membership fees
 - F. Other sources: (Specify)
 - a. _____
 - b. _____
 - c. _____
 - d. _____

G. TOTAL REVENUE

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- Fa. _____
- Fb. _____
- Fc. _____
- Fd. \$ 58,533.00 G.

2. EXPENSES
- A. Fees or commissions
 - B. Salaries
 - C. Payroll taxes
 - D. Employee benefits
 - E. Cost of merchandise for resale
 - F. Cost of entertainment
 - G. Postage
 - H. Advertising
 - I. Telephone
 - J. Rental of equipment
 - K. Facilities charge
 - L. Permits
 - M. Other expenses: (Specify)
 - a. _____
 - b. _____
 - c. _____
 - d. _____

N. TOTAL EXPENSES

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____
- K. _____
- L. _____
- Ma. _____
- Mb. _____
- Mc. _____
- Md. \$ 78,194.20 N.

3. Distribution or net to charitable organization or charitable purposes

4. (a) Is any officer, director, partner or owner of the Commercial Fundraiser in any way affiliated with or control, directly or indirectly, the charitable organization for which the Commercial Fundraiser has contracted to solicit?

☐ Yes ☒ No If "yes," complete the following:

Name of officer, director, partner or owner of Commercial Fundraiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization

(b) For each affiliation identified in 4(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and complete.

James Harris President 5-1-02
Printed Name Title Date
INGRID NEWKIRK PRESIDENT 5/13/02
Printed Name Title Date
Margaret Libby Davis Asst. Secretary 5/13/02
Printed Name Title Date

401313

RECEIVED
JUN 03 2002
ARMY OF CHINA

401314

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Name and Address of Commercial Fundraiser:

CF Number 486

Harris O'Malley Marketing, Inc.

Name of Commercial Fundraiser

23241 Ventura Blvd., Suite 101

Address of Commercial Fundraiser

Woodland Hills CA 91364

City, State, and ZIP Code of Commercial Fundraiser

Telephone Solicitation for 7/29/2002 held (on) (from) 200 to 12/31/2002

Charitable Donations Activity

Name and Address of Charitable Organization or Charitable Purposes:

CT No. 571013 F.E.I.N. No. 52-1218336

People for the Ethical Treatment of Animals

Name of Charity

501 Front Street

Address of Charity

Norfolk VA 23510

City, State, and ZIP Code of Charity

(Date or dates must be shown)

1. REVENUE
- A. Cash contributions
 - B. Entertainment sales or admission charges
 - C. Sales from products
 - D. Advertisement sales
 - E. Membership fees
 - F. Other sources: (Specify)
 - a. _____
 - b. _____
 - c. _____
 - d. _____

G. TOTAL REVENUE

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- Fa. _____
- Fb. _____
- Fc. _____
- Fd. \$172,406.00 G.

2. EXPENSES
- A. Fees or commissions
 - B. Salaries
 - C. Payroll taxes
 - D. Employee benefits
 - E. Cost of merchandise for resale
 - F. Cost of entertainment
 - G. Postage
 - H. Advertising
 - I. Telephone
 - J. Rental of equipment
 - K. Facilities charge
 - L. Permits
 - M. Other expenses: (Specify)
 - a. _____
 - b. _____
 - c. _____
 - d. _____

N. TOTALEXPENSES

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____
- K. _____
- L. _____
- Ma. _____
- Mb. _____
- Mc. _____
- Md. \$107,045.00 N.
- \$65,360.00 O.

3. Distribution or net to charitable organization or charitable purposes

4. (a) Is any officer, director, partner or owner of the Commercial Fundraiser in any way affiliated with or control, directly or indirectly, the charitable organization for which the Commercial Fundraiser has contracted to solicit?

☒ Yes ☒ No If "yes," complete the following:

Name of officer, director, partner or owner of Commercial Fundraiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization

(b) For each affiliation identified in 4(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalty of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, the report is true and correct.

JAMES HARRIS PRESIDENT 11-27-02
Printed Name Title Date

organization for verifying the distribution.

INGRID NEWARK PRESIDENT 12/12/02
Printed Name Title Date

Margaret Libby Davis Asst. Sec/Controller 12/12/02
Printed Name Title Date

Signature of authorized officer/director/partner/owner